

APPLICANT'S INFORMATION DISCLOSURE CITATION (Substitute Form PTO-1449B)	Attorney Docket: 92077.003US3	Serial No.: 09/864,389
	Applicant: Jacob RICHTER	
	Filing Date: May 25, 2001	Group Art Unit: 3773

NON PATENT LITERATURE DOCUMENTS

Examiner Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	Translation
	1.	Office Actions and Responses to Office Actions of related U.S. Application No. 11/395,751 (Attorney docket no. 92077.003US10): <ul style="list-style-type: none"> Final Rejection dated 7/14/2010. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input checked="" type="checkbox"/> N/A
	2.	Office Actions and Responses to Office Actions of related U.S. Application No. 12/042,470 (Attorney docket no. 92077.003US11): <ul style="list-style-type: none"> Response to Non-Final Rejection dated 8/10/2010; and Non-Final Rejection dated 5/10/2010. 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input checked="" type="checkbox"/> N/A
	3.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A
	4.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A
	5.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A
	6.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A
	7.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A
	8.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A
	9.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A
	10.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Abstract <input type="checkbox"/> N/A

Examiner Signature		Date Considered	
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP §609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.			